

Express Mail Label Number: EV 371627026 US

Date of Deposit: March 16, 2004

**Attorney Docket No: RONI-020/01US
(186980-2050)**

PATENT

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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

19270 U.S. PTO
10/801930
031604

UTILITY PATENT APPLICATION TRANSMITTAL

CROSS-REFERENCE TO RELATED APPLICATIONS

This application claims priority under 35 U.S.C. §119(e) to U.S. Provisional Application Serial No. 60/456,023, entitled SPATIALLY-MUTLIPLEXED COMMUNICATION SYSTEM UTILIZING RF-BASED SIGNAL COMBINING, filed March 17, 2003, and to U.S. Provisional Application Serial No. 60/467,295, entitled WEIGHT GENERATION METHOD FOR RF SIGNAL COMBINING IN MULTI-ANTENNA COMMUNICATION SYSTEMS, filed May 1, 2003, each of which are herein incorporated by reference in their entirety.

Transmitted herewith for filing is a U.S. Non-Provisional Utility Patent Application entitled:

MULTI-ANTENNA COMMUNICATION SYSTEMS UTILIZING RF-BASED AND BASEBAND SIGNAL WEIGHTING AND COMBINING

naming as inventors: SEVERINE CATREUX
VINKO ERCEG
PIETER ROUX
PIETER VAN ROOYEN
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and including:

- [X] (43) pages of description (before the claims);
- [X] (8) pages of claims ((44) total claims; (7) independent claims);
- [X] One (1) Sheet of Abstract;
- [X] One (1) Application Cover Sheet;
- [X] (10) sheets of drawing(s) including Figures 1A - 10.

Also enclosed are:

- ☐ Nonpublication Request and Certification
☐ Check No. ___ in the amount of \$___ for the total fee as calculated below
☒ Return receipt postcard
☐ Other:

The filing fee has been calculated as follows ☐ and in accordance with the enclosed preliminary amendment:

	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee					\$770.00
Total Claims		- 20 =		x \$18.00	
Independent Claims		- 3 =		x \$86.00	
If multiple dependent claims are presented, add \$290.00					
Total Application Fee					
If an Assertion of Entitlement to Small Entity Status is enclosed, subtract 50% of Total Application Fee					
Other fees: (specify)					
TOTAL FEE DUE					

- ☒ This application is being filed without a filing fee. Issuance of a Notice to File Missing Parts of Application is respectfully requested.
☐ A check for the total fee is attached.
☐ Please charge \$___ to Deposit Account No. (PA) 03-3117 (RE) 50-1283 for the total fee. This paper is being submitted in duplicate.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 03-3117.

Please direct all correspondence concerning this application to:

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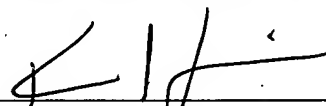
CUSTOMER NUMBER: (PA) **23419**

Dated: March 16, 2004

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Respectfully submitted,
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By:



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